

<p>United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460</p> <p>UIC Federal Reporting System Part III: Inspections Mechanical Integrity Testing</p> <p>(This information is solicited under the authority of the Safe Drinking Water Act)</p>					I. Name and Address of Reporting Agency United States Environmental Protection Agency California Division of Oil, Gas and Geothermal Resources 801 K Street, MS 20-20 Sacramento, CA 95814						
II. Date Prepared (month, day, year) 12/09/2014			III. State Contact (name, telephone no.) Jerry Salera (916) 323-1781		IV. Reporting Period (month, year) From October 1, 20 <input type="text" value="13"/> To <input type="text" value="09/30/2014"/>						
					Class and Type of Injection Wells						
					I	II			III	IV	V
						SWD 2D	ER 2R	HC 2H			
V. Summary of Inspections	Total Wells	A	Number of Wells Inspected		<input type="text" value=""/>	<input type="text" value="1,133"/>	<input type="text" value="7,386"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
	Total Inspections	B	1. Number of Mechanical Integrity Tests (MIT) Witnessed		<input type="text" value=""/>	<input type="text" value="739"/>	<input type="text" value="1,856"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			2. Number of Emergency Response or Complaint Response Inspections		<input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			3. Number of Well Constructions Witnessed		<input type="text" value=""/>	<input type="text" value="20"/>	<input type="text" value="77"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			4. Number of Well Pluggings Witnessed		<input type="text" value=""/>	<input type="text" value="39"/>	<input type="text" value="1,431"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			5. Number of Routine/Periodic Inspections		<input type="text" value=""/>	<input type="text" value="1,345"/>	<input type="text" value="4,584"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
VI. Summary of Mechanical Integrity (MI)	Total Wells	A	Number of Wells Tested or Evaluated for Mechanical Integrity (MI)		<input type="text" value=""/>	<input type="text" value="1,416"/>	<input type="text" value="6,238"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
	B	No. of Rule-Authorized Wells Tested/Evaluated for MI		Passed 2-part test		<input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
				Failed 2-part test		<input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
	For Significant Leak	C	1. Number of Annulus Pressure Monitoring Record Evaluations		Well Passed	<input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="2,188"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
					Well Failed	<input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="19"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			2. No. of Casing/Tubing Pressure Tests		Well Passed	<input type="text" value=""/>	<input type="text" value="241"/>	<input type="text" value="1,735"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
					Well Failed	<input type="text" value=""/>	<input type="text" value="22"/>	<input type="text" value="72"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			3. Number of Monitoring Record Evaluations		Well Passed	<input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
					Well Failed	<input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			4. No. of Other Significant Leak Tests/Evaluations (Specify)		Well Passed	<input type="text" value=""/>	<input type="text" value="1,024"/>	<input type="text" value="2,568"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
					Well Failed	<input type="text" value=""/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
	For Fluid Migration	D	1. Number of Cement Record Evaluations		Well Passed	<input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
					Well Failed	<input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			2. Number of Temperature/Noise Log Tests		Well Passed	<input type="text" value=""/>	<input type="text" value="18"/>	<input type="text" value="151"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
Well Failed					<input type="text" value=""/>	<input type="text" value="3"/>	<input type="text" value="3"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	
3. No. of Radioactive Tracer/Cement Bond Tests			Well Passed	<input type="text" value=""/>	<input type="text" value="1,137"/>	<input type="text" value="3,957"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>		
			Well Failed	<input type="text" value=""/>	<input type="text" value="4"/>	<input type="text" value="34"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>		
4. No. of Other Fluid Migration Tests/Evaluations (Specify)			Well Passed	<input type="text" value=""/>	<input type="text" value="9"/>	<input type="text" value="30"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>		
			Well Failed	<input type="text" value=""/>	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>		
VII. Summary of Remedial Action	Total Wells	A	Number of Wells with Remedial Action		<input type="text" value=""/>	<input type="text" value="9"/>	<input type="text" value="87"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
	Total Remedial Actions	B	1. Number of Casing Repaired/Squeeze Cement Remedial Actions		<input type="text" value=""/>	<input type="text" value="2"/>	<input type="text" value="21"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			2. Number of Tubing/Packer Remedial Actions		<input type="text" value=""/>	<input type="text" value="2"/>	<input type="text" value="55"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			3. Number of Plugging/Abandonment Remedial Actions		<input type="text" value=""/>	<input type="text" value="3"/>	<input type="text" value="1"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
			4. Number of Other Remedial Actions (Specify)		<input type="text" value=""/>	<input type="text" value="4"/>	<input type="text" value="13"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
VIII. Remarks/Ad Hoc Report (Attach additional sheets) <input style="width: 500px;" type="text"/>											
Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.											
Signature and Typed or Printed Name and Title of Person Completing Form								Date 12/09/2014	Telephone No. (916) 323-1781		

Instructions and Definitions

(All reporting is cumulative, year to date, and begins with October 1.)

Section V. Summary of Inspections

A complete inspection should include an assessment of: the well head, pressure and flow meters, pipeline connections, and any other equipment associated with the injection system; an inspection is complete only when a report has been filed with the regulating authority.

Item A: Enter under each well class the number of wells that have been inspected this year to date. These totals track the percentage of the injection well universe inspected each year. Enter a well only once each year.

Total Inspections: (This year to date)

Item 1: Enter under each well class the number of inspections to witness field Mechanical Integrity Tests. (At least 25% of MITs performed by operators each year should be witnessed.)

Item 2: Enter under each well class the number of inspections that have been in response to a problem reported to the regulating authority.

Item 3: Enter under each well class the number of inspections of well constructions or any preoperational activities.

Item 4: Enter under each well class the number of inspections of well pluggings or pluggings and abandonment.

Item 5: Enter under each well class the number of inspections that have been routine/periodic.

Section VI. Summary of Mechanical Integrity

A complete MIT is composed of a test for significant leaks in the casing, tubing or packer and a test for significant fluid migration into a USDW through vertical channels adjacent to the well bore. An MIT consists of a field test on a well or an evaluation of a well's monitoring records (i.e., annulus pressure, etc.) or cement records. At a minimum, the mechanical integrity of a Class I, II, or III (solution mining of salt) well should be demonstrated at least once every five years during the life of the well.

Item A: Enter under each well class the number of wells that have had a complete MIT this year to date. These totals track the percentage of the injection well universe tested for MI each year. Enter a well only once each year.

Item B: Enter under the appropriate well class the number of rule authorized wells that have passed a complete MIT and the number that have failed a complete MIT this year to date.

Item C: Significant Leak Tests: (This year to date)

Item 1-4: Enter under each well class the number of times wells have passed or failed a field test/record evaluation for significant leaks (be specific).

Item D: Fluid Migration Tests: (This year to date)

Items 1-4: Enter under each well class the number of times wells have passed or failed a field test/record evaluation for fluid migration (be specific).

Section VII. Summary of Remedial Action

A failure of mechanical integrity (MI) may occur at any time during the life of an injection well until it is plugged and abandoned in accordance with a preapproved plan. Failure may be identified during an inspection, a field test, an evaluation of well records, or during routine operation of a well. Remedial actions include additional permit conditions, monitoring or testing, or one of the actions specified below.

Item A: Enter under each well class the number of wells that have received remedial actions this year to date. This total tracks the percentage of the injection well universe that have received remedial action each year. Enter a well only once each year.

Total Remedial Actions: (This year to date)

Item 1-4: Enter under each well class the number of times that wells have received remedial action (be specific).

Paperwork Reduction Act

The public reporting and record keeping burden for this collection of information is estimated to average 5 hours per response. Burden means the total time, effort, or financial resource expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal Agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to the collection of information; search data sources; complete and review the collection of information; and, transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including the use of automated collection techniques to Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW., Washington, DC 20460. Include the OMB control number in any correspondence. Do not send the completed forms to this address.